



Terry E. Branstad  
GOVERNOR

## OFFICE OF THE GOVERNOR

Kim Reynolds  
LT. GOVERNOR

**Send this application form, a cover letter and a copy of your resume to:**

Email: Christina.Bettini@iowa.gov

Fax: 515-725-3527

Mail: Office of the Governor, Attn: Internships, State Capitol, Des Moines, IA 50319

**First Name** \_\_\_\_\_ **M.I.** \_\_\_\_\_ **Last Name** \_\_\_\_\_

**Areas of Interest** (Rank in order of priority; 1 = highest priority)

\_\_\_\_\_ Policy \_\_\_\_\_ Constituent Services  
\_\_\_\_\_ Legal \_\_\_\_\_ Lt. Governor  
\_\_\_\_\_ State-Federal Relations (Note: internship is located in Washington D.C)

**Circle the Internship cycle(s) you are available for:**

Spring Summer Fall  
(January-May) (June-August) (September-December)

**Specify dates of availability:** \_\_\_\_\_

**Specify the weekdays and hours you will be able to work weekly:**

Note: You must commit to at least 16 hours per week to qualify.

Monday: \_\_\_\_\_

Tuesday: \_\_\_\_\_

Wednesday: \_\_\_\_\_

Thursday: \_\_\_\_\_

Friday: \_\_\_\_\_



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### PERSONAL INFORMATION

Current Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Permanent Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

High School: \_\_\_\_\_

High School Address: \_\_\_\_\_

Year of High School Graduation: \_\_\_\_\_

College(s) Attended: \_\_\_\_\_

College Graduation Date: \_\_\_\_\_

Major(s): \_\_\_\_\_

Major GPA: \_\_\_\_\_

Minor(s): \_\_\_\_\_

Overall GPA: \_\_\_\_\_

Additional Education: \_\_\_\_\_

Area of Focus: \_\_\_\_\_

Date of Graduation: \_\_\_\_\_

GPA: \_\_\_\_\_



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**Will this internship qualify for credit?**      YES      NO

The faculty advisor or internship coordinator that will be working with our office and you to facilitate this internship is: \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**REFERENCES:** Please provide three references.

1. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

2. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

3. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Additional questions or comments:

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